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APPLICATION NO.	FILING DATE		FIRST NAMED	INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
APPLN. TYPE	OLDERMASK OPENING T	O PREVENT DE		<del></del>	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO NO		\$1400		\$300	\$1700	05/15/2006		
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EXAMINER		ART UNIT 2826			CLASS-SUBCLASS				
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